

# 2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000005042

FILED  
Apr 09, 2010  
Secretary of State

**Entity Name:** TRUTH OF THE SPIRIT MINISTRIES, INC.

**Current Principal Place of Business:**

5330 YAUPON STREET  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

5330 YAUPON STREET  
ORLANDO, FL 32811

**New Mailing Address:**

**FEI Number:** 59-3594767      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

ROBINSON, GERALD REV.  
5330 YAUPON STREET  
ORLANDO, FL 32811      US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** GERALD A. ROBINSON

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PPD  
**Name:** ROBINSON, GERALD A  
**Address:** 5330 YAUPON STREET  
**City-St-Zip:** ORLANDO, FL 32811

**Title:** VPD  
**Name:** ARTHUR, ARDON  
**Address:** 13034 SUNKISS LOOP  
**City-St-Zip:** WINDERMERE, FL 34786

**Title:** D  
**Name:** GOULD, CELIA R  
**Address:** 963 DREW AVE.  
**City-St-Zip:** ORLANDO, FL 32805

**Title:** TT  
**Name:** MILLS, CONNIE  
**Address:** 2117 COBBLEFIELD CIRCLE  
**City-St-Zip:** APOKA, FL 32703

**Title:** TD  
**Name:** ROBINSON, BETTY J  
**Address:** 5330 YAUPON STREET  
**City-St-Zip:** ORLANDO, FL 32811

**Title:** TBM  
**Name:** BULGER, VANESSIA  
**Address:** 3448 LAKE TINY CIRCLE  
**City-St-Zip:** ORLANDO, FL 32818

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** GERALD A. ROBINSON

PPD

04/09/2010

Electronic Signature of Signing Officer or Director

Date